## N940000005083

(Requestor's Name)
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP ` WAIT MAIL
(Business Entity Name)
(Eddinoso Eliais, Maillo)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100282231121

02/22/16--01011--007 \*\*43.75

2016 FEB 22 MH 8: 39
SECRETARY OF STAIL AND A SCREEN BRIDGE BRIDG

EFFECTIVE DATE

ALL Diss CC

FEB 2 3 2016 I ALBRITTON

## **COVER LETTER**

TO: Amendment Section

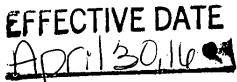
Tallahassee, FL 32314

Division of Corporations
SUBJECT: DISSOLUTION OF a NON-Profit Curporation
DOCUMENT NUMBER: N 940000 50 83
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Thomas W. Joves (Name of Contact Person)
Women's Resource Centers of Jacksonville, INC. (Firm/Company)
2701-1 HIGHWAY 301 NORTH
JACKSONVIlle, FL 32234
(City/State and Zip Code)
For further information concerning this matter, please call:
Thomas Jones at (904) 759-8916  (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION 4



Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution: The name of the corporation as currently filed with the Florida Department of State: FIRST: Women's Resource Center at JACKSONVILLE, INC. The document number of the corporation (if known): N 9400000 5083 SECOND: THIRD: Adoption of Dissolution (COMPLETE SECTION I OR II) **SECTION 1** If the corporation has members entitled to vote: (CHECK/COMPLETE ONE) The date of meeting of members at which the resolution to dissolve was adopted. 2-11-16 . The number of votes cast by the members was sufficient for approval. ☐ The resolution was adopted by written consent of the members and executed in accordance with section 617.0701, Florida Statutes. **SECTION II** If the corporation has no members or members entitled to vote on the dissolution: The corporation has no members or members entitled to vote on the dissolution. The date of adoption of the resolution by the board of directors was \_\_\_\_\_\_. The number of directors in office was \_\_\_\_\_ and the vote for resolution was \_\_\_\_\_ for and \_\_\_\_\_ against. (Must be a majority vote) Effective date of dissolution, if applicable: April 30 2016

(no more than 90 days after dissolution file date) FOURTH Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. re: Morras W. Jonas
(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary) Thomas W. Jones
(Typed or printed name of person signing) President
(Title of person signing)

Filing Fee: \$35